

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	MOTION AND ORDER TO CLOSE PROCEEDINGS TO PUBLIC	CASE NO. PETITION NO.
Court address	Court telephone no.	

1. In the matter of
 (name(s), alias(es), DOB)

MOTION

2. I am the representative for _____
 Name(s)

_____ and **I request** that

- ☐ a. the proceedings during the testimony of the child witness(es) be closed to the public.
- ☐ b. the proceedings during the testimony of the victim(s) be closed to the public.

3. The welfare of the child witness(es) or the victim(s) requires the closing of the proceedings during the testimony of the child witness(es) or the victim(s) for the following reasons:

 Date

 Attorney signature

 Signature of person making motion

 Name (type or print) Bar no.

 Name (type or print)

 Address

 Address

 City, state, and zip Telephone no.

 City, state, and zip Telephone no.

ORDER

4. Date of hearing: _____ Judge/Referee: _____
 Bar no.

IT IS ORDERED:

- ☐ 5. The motion is denied.
- ☐ 6. The motion is granted for the following reasons:

 Date

 Judge

Do not write below this line - For court use only